2:10-bk-75964 Doc#: 1 Filed: 11/15/10 Entered: 11/15/10 10:54:37 Page 1 of 53

| B1 (Official) | <u>Form 1)(4/</u> | | United S Wes | States tern D | Bankı istrict o | ruptcy f Arkan | Court sas | | | | Vo | luntary Petition |
|--|---|---|--|---|---|-------------------------------------|--|--|--|---|---|------------------------------|
| Name of De Smith, S | * | ividual, ento | er Last, First, | Middle): | | | | of Joint De | ebtor (Spouse ley J | e) (Last, First | , Middle): | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | | | | | used by the I maiden, and | | | 8 years | |
| Last four dig | | Sec. or Indi | vidual-Taxpa | yer I.D. (| ITIN) No./0 | Complete E | | our digits o | all) | Individual- | Taxpayer l | I.D. (ITIN) No./Complete EIN |
| Street Addre 3314 Fre Fort Sm | esno | or (No. and | Street, City, a | nd State) | _ | ZIP Code | 331 Foi | Address of 14 Fresno rt Smith, | | (No. and St | reet, City, | ZIP Code |
| County of R Sebastia | | of the Princ | cipal Place of | Business | | 72903 | Se | bastian | ence or of the | • | | |
| Mailing Add | lress of Deb | otor (if diffe | rent from stre | eet addres | ss): | ZIP Code | | ng Address | of Joint Debt | or (if differe | nt from str | reet address): ZIP Code |
| Location of I | | | | | | | <u> </u> | | | | | |
| Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) □ De | | | (Check one box) ☐ Health Care Business ☐ Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank ☐ Other Tax-Exempt Entity (Check box, if applicable) ☐ Debtor is a tax-exempt organization under Title 26 of the United States Chapter 7 Chapter 9 Chapter 11 Chapter 12 Chapter 13 Debts are primarily consumer defined in 11 U.S.C. § 101(8) "incurred by an individual pri | | | Petition is F | hapter 15 a Foreign hapter 15 a Foreign e of Debts k one box) | Petition for Recognition Main Proceeding Petition for Recognition Nonmain Proceeding | | | | |
| attach sign debtor is u Form 3A. | g Fee attached to be paid in ned application unable to pay waiver reque | n installments on for the cou fee except in | (applicable to urt's consideration installments. In the to chapter urt's consideration in the total transmission in the total transmission in the total transmission in the total transmission in the transmis | individual on certifyi Rule 1006(7 individu | ng that the (b). See Officals only). Mu | Check Check Check Check BB. | one box: Debtor is a si Debtor is not if: Debtor's agg are less than all applicabl A plan is bei Acceptances | mall business a small busi regate nonco \$2,343,300 (e boxes: ng filed with of the plan w | Chaps debtor as definess debtor as ontingent liquidanount subject this petition. | oter 11 Debt ned in 11 U.S. defined in 11 U ated debts (exc to adjustment | ors C. § 101(51 U.S.C. § 10: cluding deb t on 4/01/13 | |
| Debtor e | stimates that | nt funds will nt, after any | ation be available exempt propfor distributi | erty is ex | cluded and | administrat | | es paid, | | THIS | S SPACE IS | FOR COURT USE ONLY |
| Estimated No. | umber of C 50- 99 | reditors 100- 199 | 200- | 1,000- 5,000 | 5,001- 10,000 | 10,001- 25,000 | 25,001- 50,000 | 50,001- 100,000 | OVER 100,000 | | | |
| Estimated As \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | |
| Estimated Li \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | |

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| BI (Official For | III 1)(4/10) | | rage 2 | | | | |
|------------------------------|---|---|---|--|--|--|--|
| Voluntar | , | Name of Debtor(s): Smith, Scotty R | | | | | |
| (This page mu | st be completed and filed in every case) | Smith, Shirley J | 14.41 -14 | | | | |
| Location | All Prior Bankruptcy Cases Filed Within Last | Case Number: | Date Filed: | | | | |
| Where Filed: | - None - | | | | | | |
| Location Where Filed: | | Case Number: | Date Filed: | | | | |
| Pe | nding Bankruptcy Case Filed by any Spouse, Partner, or | Affiliate of this Debtor (If more than | n one, attach additional sheet) | | | | |
| Name of Debt - None - | or: | Case Number: | Date Filed: | | | | |
| District: | | Relationship: | Judge: | | | | |
| | Exhibit A | | khibit B | | | | |
| forms 10K a pursuant to S | leted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.) | I, the attorney for the petitioner named have informed the petitioner that [he of 12, or 13 of title 11, United States Co | I whose debts are primarily consumer debts.) d in the foregoing petition, declare that I or she] may proceed under chapter 7, 11, de, and have explained the relief available tify that I delivered to the debtor the notice | | | | |
| ☐ Exhibit | A is attached and made a part of this petition. | X /s/ Joseph Cornell | November 15, 2010 | | | | |
| | | Signature of Attorney for Debtor(s Joseph Cornell 2004129 |) (Date) | | | | |
| | Exh | ibit C | | | | | |
| l | r own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition. | pose a threat of imminent and identifiable | e harm to public health or safety? | | | | |
| No. | | | | | | | |
| | | ibit D | | | | | |
| - | eted by every individual debtor. If a joint petition is filed, each D completed and signed by the debtor is attached and made and petition: | • | a separate Exhibit D.) | | | | |
| ■ Exhibit | D also completed and signed by the joint debtor is attached a | and made a part of this petition. | | | | | |
| | Information Regardin | = | | | | | |
| | (Check any ap Debtor has been domiciled or has had a residence, principa days immediately preceding the date of this petition or for | al place of business, or principal asse | ts in this District for 180 | | | | |
| | There is a bankruptcy case concerning debtor's affiliate, ge | | - | | | | |
| | | | | | | | |
| | Certification by a Debtor Who Reside (Check all app | | rty | | | | |
| | Landlord has a judgment against the debtor for possession | of debtor's residence. (If box checked, | complete the following.) | | | | |
| | (Name of landlord that obtained judgment) | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | (Address of landlord) | | | | | | |
| | Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment f | | | | | | |
| | Debtor has included in this petition the deposit with the coafter the filing of the petition. | urt of any rent that would become du | e during the 30-day period | | | | |
| | □ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)). | | | | | | |

B1 (Official Form 1)(4/10) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Scotty R Smith

Signature of Debtor Scotty R Smith

X /s/ Shirley J Smith

Signature of Joint Debtor Shirley J Smith

Telephone Number (If not represented by attorney)

November 15, 2010

Date

Signature of Attorney*

X /s/ Joseph Cornell

Signature of Attorney for Debtor(s)

Joseph Cornell 2004129

Printed Name of Attorney for Debtor(s)

Wayne Young Law Firm, PA

Firm Name

3561 N. College Avenue Fayetteville, AR 72703

Address

Email: jcornell@wayneyounglaw.com 479-571-8696 Fax: 479-571-8984

Telephone Number

November 15, 2010

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Smith, Scotty R Smith, Shirley J

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| T 2 | |
|------------|--|
| | |
| | |
| | |

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| T |
|----------|
| |
| |
| |

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Western District of Arkansas

| _ | Scotty R Smith | | | | |
|-------|-----------------|-----------|----------|----|--|
| In re | Shirley J Smith | | Case No. | | |
| | | Debtor(s) | Chapter | 13 | |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- ■1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page 2 |
|---|--|
| ☐4. I am not required to receive a credit coun | seling briefing because of: [Check the applicable |
| statement.] [Must be accompanied by a motion for d | etermination by the court.] |
| □Incapacity. (Defined in 11 U.S.C. § | 109(h)(4) as impaired by reason of mental illness or mental |
| deficiency so as to be incapable of realizing a | and making rational decisions with respect to financial |
| responsibilities.); | |
| □Disability. (Defined in 11 U.S.C. § 1 | 109(h)(4) as physically impaired to the extent of being |
| unable, after reasonable effort, to participate i | in a credit counseling briefing in person, by telephone, or |
| through the Internet.); | |
| □Active military duty in a military co | mbat zone. |
| □5. The United States trustee or bankruptcy a requirement of 11 U.S.C. § 109(h) does not apply in | administrator has determined that the credit counseling this district. |
| I certify under penalty of perjury that the | information provided above is true and correct. |
| Signature of Debtor: | /s/ Scotty R Smith |
| | Scotty R Smith |

November 15, 2010

Date:

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Western District of Arkansas

| In re | Scotty R Smith Shirley J Smith | | Case No. | |
|-------|-----------------------------------|-----------|----------|----|
| | | Debtor(s) | Chapter | 13 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- ■1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page 2 |
|---|---|
| □4. I am not required to receive a credit cour statement.] [Must be accompanied by a motion for a | nseling briefing because of: [Check the applicable determination by the court.] |
| * · · · | 109(h)(4) as impaired by reason of mental illness or mental and making rational decisions with respect to financial |
| • · · · · · · · · · · · · · · · · · · · | 109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or |
| ☐Active military duty in a military co | ombat zone. |
| □5. The United States trustee or bankruptcy a requirement of 11 U.S.C. § 109(h) does not apply in | administrator has determined that the credit counseling this district. |
| I certify under penalty of perjury that the | information provided above is true and correct. |
| Signature of Debtor: | |
| | Shirley J Smith |

Date: November 15, 2010

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Western District of Arkansas

| In re | Scotty R Smith, | | Case No. | |
|-------|-----------------|---------|----------|----|
| | Shirley J Smith | | | |
| _ | | Debtors | Chapter | 13 |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 116,000.00 | | |
| B - Personal Property | Yes | 4 | 51,634.00 | | |
| C - Property Claimed as Exempt | Yes | 2 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 125,282.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 5 | | 114,182.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 3,424.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 1 | | | 1,692.00 |
| Total Number of Sheets of ALL Schedu | ıles | 18 | | | |
| | T | otal Assets | 167,634.00 | | |
| | | | Total Liabilities | 239,464.00 | |

Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court Western District of Arkansas

| In re | Scotty R Smith, | | Case No. | |
|-------|-----------------|---------|----------|----|
| | Shirley J Smith | | | |
| _ | | Debtors | Chapter | 13 |
| | | | = | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|----------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 9,049.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 9,049.00 |

State the following:

| Average Income (from Schedule I, Line 16) | 3,424.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 18) | 1,692.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 861.00 |

State the following:

| State the lone wing. | | |
|--|------|------------|
| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 0.00 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 114,182.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 114,182.00 |

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B6A (Official Form 6A) (12/07)

| In re | Scotty R Smith, | Case No. |
|-------|-----------------|----------|
| | Shirley J Smith | |

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Residence located at 3314 Fresno in Fort Smith, | | J | 116,000.00 | 107,709.00 |
|---|--|---|--|----------------------------|
| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |

Residence located at 3314 Fresno in Fort Smith, Arkansas; 3 bedroom; 2 bathroom; 1,667 sq ft **Market value based on the Sebatian County Assessor's 2010 Tax Appraisal Value**

Sub-Total > **116,000.00** (Total of this page)

Total > 116,000.00

B6B (Official Form 6B) (12/07)

| In re | Scotty R Smith, | Case No |
|-------|-----------------|---------|
| | Shirley J Smith | |

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | , | · · · · · · · · · · · · · · · · · · · | | |
|----|--|---|---|---|
| | Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
| 1. | Cash on hand | Cash and currency | J | 54.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, | Checking account with First National Bank account number ending in 4680 | J | 8.00 |
| | thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or | Checking account with US Bank account ending in 6802 | J | 30.00 |
| | cooperatives. | Checking account with Arvest account ending in 3269 | J | 1,930.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | x | | |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | Living room furniture; bedroom furniture; table and chairs; stove; refrigerator; washer and dryer; mircrowave; small appliances; cooking utensils; lamps and accessories; TVs; DVD; Lawn mower; hand tools; power tools; lawn furniture; gardening tools; | J | 10,000.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | Collectible dolls; wall decor | J | 6,000.00 |
| 6. | Wearing apparel. | Family clothing | J | 2,000.00 |
| 7. | Furs and jewelry. | Wedding Rings; Misc. jewelry | J | 2,500.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | Digital Camera; Camcorder; 22 gun | J | 600.00 |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Term life insurance provided by Fidelity Life - Husband **No cash Value** | н | 0.00 |
| | | | | |

| Sub-Total > | 23,122.00 |
|----------------------|-----------|
| (Total of this page) | |

³ continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

| In | re Scotty R Smith, Shirley J Smith | | Case | e No | |
|-----|---|------------------|--|---|---|
| | | SCI | Debtors HEDULE B - PERSONAL PROPERTY (Continuation Sheet) | , | |
| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
| | | 1 | Term Life insurance provided by Stonebridge Life- Wife **No cash value** | W | 0.00 |
| 10. | Annuities. Itemize and name each issuer. | X | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | RA provided by Prime Vest - Wife RA provided by Prime Vest - Husband | W H | 100.00 500.00 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars | X | | | |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| | | | | | |
| | | | (Total | Sub-Tot of this page) | al > 600.00 |

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

| In re | Scotty R Smith, |
|-------|-----------------|
| | Shirley J Smith |

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--|---|---|
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | Х | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | * | 2007 Jeep Liberty; 49,368 mileage **N.A.D.A. Clean Retail Value ** | J | 17,200.00 |
| | | 1 | 1999 Chevrolet S10; 65,165 mileage **N.A.D.A. Clean Retail Value ** | J | 5,737.00 |
| | |] \ | 2005 Hyundai Accent; 64,000 mileage Debtors nieces drives and makes payments on vehicle. **N.A.D.A. Clean Retail Value ** | W | 4,975.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| | | | (To | Sub-Totatal of this page) | al > 27,912.00 |

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

| In re | Scotty R Smith, | Case No |
|-------|-----------------|---------|
| | Shirley J Smith | |

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|---|---|--|
| 31. Animals. | 1 dog **Sentimental value only. No case value.** | J | 0.00 |
| 32. Crops - growing or harvested. Give particulars. | x | | |
| 33. Farming equipment and implements. | x | | |
| 34. Farm supplies, chemicals, and feed. | x | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | |

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 51,634.00 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/10)

| In re | Scotty R Smith, | Case No. |
|-------|-----------------|----------|
| | Shirley J Smith | |

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled (Check one box) ■ 11 U.S.C. §522(b)(2) □ 11 U.S.C. §522(b)(3) | | lebtor claims a homestead exe (Amount subject to adjustment on 4/1, with respect to cases commenced on | /13, and every three years thereaj |
|---|---|--|---|
| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
| Real Property Residence located at 3314 Fresno in Fort Smith, Arkansas; 3 bedroom; 2 bathroom; 1,667 sq ft **Market value based on the Sebatian County Assessor's 2010 Tax Appraisal Value** | 11 U.S.C. § 522(d)(1) | 8,291.00 | 116,000.00 |
| <u>Cash on Hand</u> Cash and currency | 11 U.S.C. § 522(d)(5) | 54.00 | 54.00 |
| Checking, Savings, or Other Financial Accounts, Checking account with First National Bank account number ending in 4680 | Certificates of Deposit 11 U.S.C. § 522(d)(5) | 8.00 | 8.00 |
| Checking account with US Bank account ending in 6802 | 11 U.S.C. § 522(d)(5) | 30.00 | 30.00 |
| Checking account with Arvest account ending in 3269 | 11 U.S.C. § 522(d)(5) | 1,930.00 | 1,930.00 |
| Household Goods and Furnishings Living room furniture; bedroom furniture; table and chairs; stove; refrigerator; washer and dryer; mircrowave; small appliances; cooking utensils; lamps and accessories; TVs; DVD; Lawn mower; hand tools; power tools; lawn furniture; gardening tools; | 11 U.S.C. § 522(d)(3) | 10,000.00 | 10,000.00 |
| Books, Pictures and Other Art Objects; Collectible Collectible dolls; wall decor | es 11 U.S.C. § 522(d)(3) | 6,000.00 | 6,000.00 |
| Wearing Apparel Family clothing | 11 U.S.C. § 522(d)(3) | 2,000.00 | 2,000.00 |
| <u>Furs and Jewelry</u> Wedding Rings; Misc. jewelry | 11 U.S.C. § 522(d)(4) | 2,500.00 | 2,500.00 |
| <u>Firearms and Sports, Photographic and Other Hol</u> Digital Camera; Camcorder; 22 gun | bby Equipment 11 U.S.C. § 522(d)(5) | 600.00 | 600.00 |
| Interests in IRA, ERISA, Keogh, or Other Pension IRA provided by Prime Vest - Wife | or Profit Sharing Plans 11 U.S.C. § 522(d)(12) | 100.00 | 100.00 |
| IRA provided by Prime Vest - Husband | 11 U.S.C. § 522(d)(12) | 500.00 | 500.00 |
| Automobiles, Trucks, Trailers, and Other Vehicles 2007 Jeep Liberty; 49,368 mileage **N.A.D.A. Clean Retail Value ** | 11 U.S.C. § 522(d)(5) | 4,501.00 | 17,200.00 |
| 1999 Chevrolet S10; 65,165 mileage **N.A.D.A. Clean Retail Value ** | 11 U.S.C. § 522(d)(2) 11 U.S.C. § 522(d)(5) | 5,737.00 0.00 | 5,737.00 |

_____ continuation sheets attached to Schedule of Property Claimed as Exempt

B6C (Official Form 6C) (4/10) -- Cont.

| . | 0 " 0 " | | C N |
|----------|-----------------|----------|----------|
| In re | Scotty R Smith, | | Case No. |
| | Shirley J Smith | <u>.</u> | |
| - | | Debtors | |

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Current Value of Property Without Deducting Exemption Value of Claimed Specify Law Providing Each Exemption Description of Property Exemption

11 U.S.C. § 522(d)(2)

2005 Hyundai Accent; 64,000 mileage Debtors nieces drives and makes payments on vehicle.

**N.A.D.A. Clean Retail Value **

Total: 42,352.00 167,634.00

101.00

4,975.00

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B6D (Official Form 6D) (12/07)

| • | | |
|-------|-----------------|----------|
| In re | Scotty R Smith, | Case No. |
| | Shirley J Smith | |

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| 000000000000000000000000000000000000000 | C | Нι | sband, Wife, Joint, or Community | CO | U N | D | AMOUNT OF | |
|---|---------------|--------|--|-------------|-------------------|----------|---|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | O D E B T O R | W W | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | ONT I NG EN | N L I Q U I D A T | I SPUTED | CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
| Account No. xxxxx7287 | | | Opened 11/01/07 | | T E D | | | |
| AmeriCredit Financial Services Attn: Bankruptcy Department PO Box 183583 Arlington, TX 76096 | | Н | 2007 Jeep Liberty; | | | | | |
| | | 丄 | Value \$ 17,200.00 | Ш | | | 12,699.00 | 0.00 |
| Account No. xxxx5690 | | | Opened 3/01/07 | | | | | |
| BAC Home Loans Servicing, LP 7105 Corporate Drive Plano, TX 75024 | | J | Residence located at 3314 Fresno in Fort Smith, Arkansas; | | | | | |
| | | | Value \$ 116,000.00 | | | | 107,709.00 | 0.00 |
| Account No. xxxx xxxx xx0 603 | | T | Opened 3/01/07 | П | T | \Box | - | |
| Chase Auto Finanace 900 Stewart Ave. Garden City, NY 11530 | | J | 2005 Hyundai Accent; | | | | | |
| | | | Value \$ 4,975.00 | 11 | | | 4,874.00 | 0.00 |
| Account No. | | | Value \$ | | | | | |
| continuation sheets attached | | | S (Total of t | Subto | | - 1 | 125,282.00 | 0.00 |
| | | | (Report on Summary of Sc | | otal ile: | | 125,282.00 | 0.00 |

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B6E (Official Form 6E) (4/10)

| • | | | |
|-------|-----------------|---------|--|
| In re | Scotty R Smith, | Case No | |
| | Shirley J Smith | | |
| _ | | Debtors | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

0 continuation sheets attached

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

| In re | Scotty R Smith, | | Case No. | |
|-------|-----------------|---------|----------|--|
| | Shirley J Smith | | | |
| | | Debtors | • | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, | CO | Н | usband, Wife, Joint, or Community | CO | U N | D | |
|--|-----------------|--------|---|--------------|----------|---|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | J C | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFE SO STATE | COZT L ZGEZT | QU | | AMOUNT OF CLAIM |
| Account No. xxxx xxx xx xxx0001 | | | Opened 9/01/04 Student Loan | T N | DATED | | |
| American Education Services Attn: Loan Origination 1200 N. 7th Street Harrisburg, PA 17102-1444 | × | J | | | | | 9,049.00 |
| Account No. xxxx xxxx xxxx xx7101 | + | | Opened 3/01/03 | + | \vdash | | , |
| Amex C/O Beckett & Lee PO Box 3001 Malvern, PA 19355 | | Н | Credit Card | | | | 05.00 |
| Account No. xxx4943 | + | | Collection for HSBC Bank | + | L | | 65.00 |
| Atlantic Credit & Finance, Inc PO Box 13386 Roanoke, VA 24033 | | Н | | | | | |
| | | | | | | | 2,264.00 |
| Account No. xxxx xxxx xx20 80 Bank of America Attn: Bankruptcy Department NC4-105-02-77 PO Box 26012 Greensboro, NC 27410 | | н | Opened 2/01/06 Charge Account | | | | 13,995.00 |
| | • | | (Total of | Subt | | | 25,373.00 |

B6F (Official Form 6F) (12/07) - Cont.

| In re | Scotty R Smith, | Case No. |
|-------|-----------------|----------|
| | Shirley J Smith | <u> </u> |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, | C | Hu | ssband, Wife, Joint, or Community | C | U | D | |
|---|-----------|-------------|-----------------------------------|------------|--------------|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODE BT OR | C H H | IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UZLLQULDAFED | SPUTED | AMOUNT OF CLAIM |
| Account No. xxxx xxxx xxxx 8006 | | | Opened 7/01/01 | ٦ | T E | | |
| Capital One Bank (USA), N.A. Attn: Debt Management PO Box 5155 Norcross, GA 30091 | | н | Credit Card | | D | | 3,306.00 |
| Account No. xxxxx2743 | | | Opened 10/01/08 | | | | |
| CBE Group 131 Tower Park Drive Suite 100 Waterloo, IA 50701 | | J | Collection for Dish Network | | | | 80.00 |
| Account No. xx-x0-829 | T | | CV-10-829 | T | | | |
| Chase Bank USA, N.A. Attn: Bankruptcy Department 270 Park Avenue Floor Twelve New York, NY 10017-2014 | | J | | | | | 2,828.00 |
| Account No. xxxx xxxx xxxx 2621 | | | Opened 4/01/04 | | | | |
| Chase Bank USA, N.A. Attn: Bankruptcy Department 270 Park Avenue Floor Twelve New York, NY 10017-2014 | | J | Credit Card | | | | 6,210.00 |
| Account No. xxxx xxxx xxxx 4066 | T | | Opened 5/01/07 | T | | | |
| Chase Bank USA, N.A. Attn: Bankruptcy Department 270 Park Avenue Floor Twelve New York, NY 10017-2014 | | J | Credit Card | | | | 2,827.00 |
| Sheet no1 of _4 sheets attached to Schedule of | | | | Sub | | | 15,251.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | e) | |

B6F (Official Form 6F) (12/07) - Cont.

| In re | Scotty R Smith, | Case No |
|-------|-----------------|---------|
| _ | Shirley J Smith | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, | Ç | Hu | sband, Wife, Joint, or Community | Ç | Ų | P | ī | |
|---|--------------|-------------|---|------------|---------------|-----------------|-----|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | OD E B T O R | C N H | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | NL I QU I DAT | D I S P U T E D | : | AMOUNT OF CLAIM |
| Account No. xx-x9-639 | 4 | | CV-09-639 | ľ | Ė | | | |
| Discover Bank DFS Services LLC P O Box 3025 New Albany, OH 43054 | | J | | | | | | 9,762.00 |
| Account No. xx-xx-1268 | | | CV-09-1268 | Т | П | Π | Τ | |
| Discover Bank DFS Services LLC P O Box 3025 New Albany, OH 43054 | | J | | | | | | 8,150.00 |
| Account No. xxxx xxxx xxxx 1564 | | | Opened 2/01/01 | \top | T | T | T | |
| Discover Financial Services Attn: Bankruptcy Department PO Box 3025 New Albany, OH 43054 | | н | Credit Card | | | | | 8,522.00 |
| Account No. xxxx xxxx xxxx 8909 | | | Opened 6/01/05 | T | T | T | T | |
| Discover Financial Services Attn: Bankruptcy Department PO Box 3025 New Albany, OH 43054 | | J | Credit Card | | | | | 8,174.00 |
| Account No. xxxx xxxx xxxx 6907 | t | \vdash | Opened 8/09/05 | + | + | + | + | |
| GE Money Bank / Sam's Club Attn: Bankruptcy Department PO Box 103104 Roswell, GA 30076 | | J | Charge Account | | | | | 2,949.00 |
| Sheet no. 2 of 4 sheets attached to Schedule of | | | | Sub | tota | al | T | 07 557 00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | this | pas | ge) |) [| 37,557.00 |

B6F (Official Form 6F) (12/07) - Cont.

| In re | Scotty R Smith, | Case No |
|-------|-----------------|---------|
| | Shirley J Smith | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER | CODEBTOR | H W | CONSIDERATION FOR CLAIM. IF CLAIM | CONTINGENT | DNLLQU | DISPUTED | AMOUNT OF CLAIM |
|---|----------|-----|---|------------|-------------|----------|-----------------|
| (See instructions above.) Account No. xxxx xxxx xxx9 673 | O R | С | Opened 5/01/06 | G E N T | I D A T E D | E D | |
| HSBC / Polrs 90 Christiana Road New Castle, DE 19720 | | J | Charge Account | | D | | 8,507.00 |
| Account No. xxxx xxxx xxx0 038 HSBC / Suzuki PO Box 5253 Carol Stream, IL 60197 | x | J | Opened 9/01/06 Charge Account | | | | 10,116.00 |
| Account No. xxxx xxxx xxxx 2481 HSBC Bank (USA), N.A. Attn: Bankruptcy Department PO Box 5253 Carol Stream, IL 60197 | | J | Opened 9/01/93 Charge Account | | | | 2,903.00 |
| Account No. xxxx xxxx xxxx 2509 HSBC Bank (USA), N.A. Attn: Bankruptcy Department PO Box 5253 Carol Stream, IL 60197 | - | н | Opened 4/01/02 Charge Account | | | | 1,634.00 |
| Account No. xxxxxx9161 Midland Credit Management, Inc PO Box 939019 San Diego, CA 92123-9019 | | J | Opened 7/01/10 Collection for Citibank | | | | 3,736.00 |
| Sheet no. _3 of _4 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | • | (Total of t | | tota | | 26,896.00 |

 $B6F\ (Official\ Form\ 6F)\ (12/07)$ - Cont.

| In re | Scotty R Smith, | Case No |
|-------|-----------------|---------|
| | Shirley J Smith | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | | | 1 - | | 1 - | - 1 | |
|--|----------|------------------|---|------------|------------|-------|----------------------------|-----------------|
| CREDITOR'S NAME, | | Hu | sband, Wife, Joint, or Community | 18 | ΙN | [| | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDAT | I | S P U T E D | AMOUNT OF CLAIM |
| Account No. xxxx xxxx xxxx 2485 | | | Opened 3/01/10 | Т | T | | Γ | |
| Paragon Way Inc 2101 W Ben White Blvd Austin, TX 78704 | | J | Collection for GE Money Bank/ JCPenney | | E D | | | 4.050.00 |
| | | | | | | | | 4,956.00 |
| Account No. xxxx xxxx xxxx 5304 | | | Opened 8/01/07 | | | Τ | | |
| Sears / CBSD Attn: Centralized Bankruptcy PO Box 20363 Kansas City, MO 64195-0363 | | J | Charge Account | | | | | |
| | | | | | | | | 3,656.00 |
| Account No. xxxxxxxx8063 | ╁ | H | Opened 3/01/07 | | H | t | \dashv | |
| Sears / CBSD Attn: Centralized Bankruptcy PO Box 20363 | | Н | Charge Account | | | | | |
| Kansas City, MO 64195-0363 | | | | | | | | |
| | | | | | | | | 91.00 |
| Account No. xxxx xxxx xxxx 8539 Security Bankcard Center, Inc. Attn: Operations Department PO Box 22116 | | Н | Opened 8/01/08 Credit Card | | | | | |
| Tulsa, OK 74121-2116 | | | | | | | | |
| | | | | | | | | 402.00 |
| Account No. | | | | | | | | |
| Sheet no. 4 of 4 sheets attached to Schedule of | | | : | Sub | tota | al | | 9,105.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | his | pag | ge) |) | 9,105.00 |
| | | | | 7 | l'ota | al | | |
| | | | (Report on Summary of So | | | |) [| 114,182.00 |

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B6G (Official Form 6G) (12/07)

| In re | Scotty R Smith, | Case No |
|-------|-----------------|---------|
| | Shirley J Smith | |
| _ | | Debtors |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

AT&T Mobility Attn: Bankruptcy Department PO Box 769 Arlington, TX 76004 Cell Phone Contract expires in 2011 **ASSUME** 2:10-bk-75964 Doc#: 1 Filed: 11/15/10 Entered: 11/15/10 10:54:37 Page 25 of 53

B6H (Official Form 6H) (12/07)

| In re | Scotty R Smith, | | Case No. |
|-------|-----------------|------------------------|----------|
| | Shirley J Smith | | |
| _ | | Debtors | |
| | | SCHEDULE H - CODEBTORS | |

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Freddie Jones PO Box 285 Arkoma, OK 74901

Tracy Jones General Delivery Springdale, AR 72762 HSBC / Suzuki PO Box 5253 Carol Stream, IL 60197

American Education Services Attn: Loan Origination 1200 N. 7th Street Harrisburg, PA 17102-1444 **B6I (Official Form 6I) (12/07)**

| _ | Scotty R Smith | | |
|-------|-----------------|-----------|--|
| In re | Shirley J Smith | Case No. | |
| | | Debtor(s) | |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status: | DEPEND | ENTS OF DEBTOR AN | ND SPOU | SE | | |
|--|--|---------------------|---------|----------|----------------|----------|
| Beotor's Warran Status. | RELATIONSHIP(S): | AGI | E(S): | | | |
| Married | None. | | | | | |
| Employment: | DEBTOR | | | SPOUSE | | |
| Occupation | | | | | | |
| Name of Employer | Retired | Homema | ker | | | |
| How long employed | | | | | | |
| Address of Employer | | | | | | |
| INCOME: (Estimate of average or | projected monthly income at time case filed) | | D | EBTOR | | SPOUSE |
| | commissions (Prorate if not paid monthly) | | \$ | 0.00 | \$ | 0.00 |
| 2. Estimate monthly overtime | | | \$ | 0.00 | \$ | 0.00 |
| 3. SUBTOTAL | | ſ | \$ | 0.00 | \$ | 0.00 |
| 4. LESS PAYROLL DEDUCTION | S | - | | | | |
| a. Payroll taxes and social sec | urity | | \$ | 0.00 | \$ | 0.00 |
| b. Insurance | , | | \$ | 0.00 | \$ | 0.00 |
| c. Union dues | | | \$ | 0.00 | \$ | 0.00 |
| d. Other (Specify): | | | \$ | 0.00 | \$ | 0.00 |
| | | | \$ | 0.00 | \$ | 0.00 |
| 5. SUBTOTAL OF PAYROLL DE | DUCTIONS | | \$ | 0.00 | \$ | 0.00 |
| 6. TOTAL NET MONTHLY TAKE | E HOME PAY | | \$ | 0.00 | \$ | 0.00 |
| 7. Regular income from operation o | f business or profession or farm (Attach detail | ed statement) | \$ | 0.00 | \$ | 0.00 |
| 8. Income from real property | | | \$ | 0.00 | \$ | 0.00 |
| 9. Interest and dividends | | | \$ | 0.00 | \$ | 0.00 |
| dependents listed above | rt payments payable to the debtor for the debtor | or's use or that of | \$ | 0.00 | \$ | 0.00 |
| 11. Social security or government as (Specify): Social Securi | | | \$ | 1,287.00 | \$ | 0.00 |
| (Specify). | ·y | | \$ —— | 0.00 | \$ | 0.00 |
| 12. Pension or retirement income | | | \$ | 846.00 | \$ | 0.00 |
| 13. Other monthly income | | | | | | |
| (Specify): Unemployme | | | \$ | 0.00 | \$ | 1,070.00 |
| Contribution | from niece for 2005 Hyundai Accent | | \$ | 0.00 | \$ | 221.00 |
| 14. SUBTOTAL OF LINES 7 THR | OUGH 13 | | \$ | 2,133.00 | \$ | 1,291.00 |
| 15. AVERAGE MONTHLY INCO | ME (Add amounts shown on lines 6 and 14) | | \$ | 2,133.00 | \$ | 1,291.00 |
| 16. COMBINED AVERAGE MON | THLY INCOME: (Combine column totals from | om line 15) | | \$ | 3,424. | 00 |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

B6J (Official Form 6J) (12/07)

| In re | Scotty R Smith Shirley J Smith | | Case No. | |
|-------|-----------------------------------|-----------|----------|--|
| | | Debtor(s) | | |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

| expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22 | .C. | |
|--|---------------|---------------|
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse." | ete a separat | e schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 0.00 |
| | · | - |
| a. Are real estate taxes included? b. Is property insurance included? Yes NoX NoX | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | 193.00 |
| b. Water and sewer | \$ | 50.00 |
| c. Telephone | \$ | 105.00 |
| d. Other Satellite | \$ | 70.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 70.00 |
| 4. Food | \$ | 300.00 |
| 5. Clothing | \$ | 80.00 |
| 6. Laundry and dry cleaning | \$ | 30.00 |
| 7. Medical and dental expenses | \$ | 50.00 |
| 8. Transportation (not including car payments) | \$ | 200.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | 82.00 |
| 10. Charitable contributions | \$ | 100.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | 0.00 |
| b. Life | \$ | 208.00 |
| c. Health | \$ | 0.00 |
| d. Auto | \$ | 80.00 |
| e. Other | \$ | 0.00 |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | | 24.00 |
| (Specify) Personal Property taxes | \$ | 24.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the | | |
| plan) | ¢. | 0.00 |
| a. Auto | \$ | 0.00 |
| b. Other | \$ | 0.00 |
| c. Other | \$ | 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) 17. Other Personal Care | \$ | 0.00 |
| 177 0 4101 | \$ | 20.00 |
| Other Pet Care | \$ | 30.00 |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ | 1,692.00 |
| | | |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: | | |
| 20. STATEMENT OF MONTHLY NET INCOME | - | |
| a. Average monthly income from Line 15 of Schedule I | \$ | 3,424.00 |
| b. Average monthly expenses from Line 18 above | \$ | 1,692.00 |
| c. Monthly net income (a. minus b.) | \$ | 1,732.00 |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Western District of Arkansas

| In re | Scotty R Smith Shirley J Smith | Case No. | |
|-------|-----------------------------------|-------------------|----|
| | | Debtor(s) Chapter | 13 |
| | | | |

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

| | I declare under penalty of perjury sheets, and that they are true and correct to | | nd the foregoing summary and schedules, consisting of _y knowledge, information, and belief. | 20 |
|------|--|-----------|--|----|
| Date | November 15, 2010 | Signature | /s/ Scotty R Smith | |
| | | | Scotty R Smith Debtor | |
| Date | November 15, 2010 | Signature | /s/ Shirley J Smith | |
| | | | Shirley J Smith Joint Debtor | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

2:10-bk-75964 Doc#: 1 Filed: 11/15/10 Entered: 11/15/10 10:54:37 Page 29 of 53

B7 (Official Form 7) (04/10)

United States Bankruptcy Court Western District of Arkansas

| In re Shirley J Smith | | Case No. | | |
|-----------------------|-----------|----------|----|--|
| | Debtor(s) | Chapter | 13 | |
| | Debtor(s) | Chapter | | |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$60,030.00 2009 - Income taken from Line 22 of Form 1040 \$54,805.00 2008 - Income taken from Line 22 of Form 1040

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|-------------|--|
| \$9,468.00 | 2010 - Year to Date Income from Pension - Husband (taken from statement dated 11/1/10) |
| \$11,770.00 | 2010 - Year to Date Income from Unemployment - Wife |
| \$14,146.00 | 2010 - Year to Date Income from Social Security |
| \$8.560.00 | 2009 - Income from Unemployment - Wife |

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITOR

AmeriCredit Financial Services
Attn: Bankruptcy Department
PO Box 183583

Arlington, TX 76096

DATES OF
PAYMENTS
AMOUNT PAID
OWING
August 2010 - September
\$1,263.00
\$12,699.00

2010

None

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
TRANSFERS TRANSFERS OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND LOCATION AND CASE NUMBER **PROCEEDING** DISPOSITION Chase Bank USA, N.A. Civil In the Circuit Court of Sebastian Writ of County, Arkansas **Garnishment**

Shirley Smith Fort Smith Division CV-10-829

Discover Bank Civil In the Circuit Court of Sebastian **Pending**

County, Arkansas Fort Smith District, Civil Division V **Shirley Smith**

CV-09-1268

Discover Bank Civil In the Circuit Court of Sebastian

Pending County, Arkansas

Scotty Smith Fort Smith District, Civil Division VI

CV-09-639

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE DESCRIPTION AND VALUE OF

DATE OF SEIZURE BENEFIT PROPERTY WAS SEIZED **PROPERTY**

Chase Bank USA, N.A. November 2010 Garnished checking account for \$50.00

Attn: Bankruptcy Department 270 Park Avenue Floor Twelve New York, NY 10017-2014

5. Repossessions, foreclosures and returns

None

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY**

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION Church Outside The Walls 1500 South Phoenix Fort Smith, AR 72901 RELATIONSHIP TO DEBTOR, IF ANY **Home congregation**

DATE OF GIFT
November 2009 -

DESCRIPTION AND VALUE OF GIFT

\$1,200.00

November 2010

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

CIN Legal Data Services 4540 Honeywell Court Dayton, OH 45424-5760 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 11/5/2010 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$40.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

First National Bank 600 Garrison Avenue Fort Smith, AR 72902 TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE Savings account with a final balance of \$2.00

AMOUNT AND DATE OF SALE OR CLOSING

5

September 2010

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

None

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE

LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

NOTICE LAW

GOVERNMENTAL UNIT

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF **GOVERNMENTAL UNIT**

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

BEGINNING AND

(ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

ENDING DATES

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

ADDRESS DATES SERVICES RENDERED **NAME**

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME **ADDRESS**

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

None

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, None controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT.

RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date November 15, 2010 Signature /s/ Scotty R Smith Scotty R Smith

Debtor

Date November 15, 2010 /s/ Shirley J Smith Signature

> **Shirley J Smith** Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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United States Bankruptcy Court Western District of Arkansas

| In re | Scotty R Smith Shirley J Smith | | Case No. | |
|--------|---|---|---|--------------------------------------|
| | | Debtor(s) | Chapter | 13 |
| | DISCLOSURE OF COMPEN | | | |
| C | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rucompensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of | ng of the petition in bankruptcy | , or agreed to be pai | d to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 3,000.00 |
| | Prior to the filing of this statement I have received | | \$ | 0.00 |
| | Balance Due | | \$ | 3,000.00 |
| 2. \$ | 274.00 of the filing fee has been paid. | | | |
| 3. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. 7 | Γhe source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 5. | ■ I have not agreed to share the above-disclosed comp | ensation with any other person | unless they are mem | bers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name | | | |
| 6. | In return for the above-disclosed fee, I have agreed to re | nder legal service for all aspect | s of the bankruptcy c | ase, including: |
| t c | a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hor | ement of affairs and plan which ors and confirmation hearing, ar educe to market value; exc ons as needed; preparation | may be required; and any adjourned hea | rings thereof; |
| 7. I | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding. | | | es, relief from stay actions or |
| | | CERTIFICATION | | |
| | certify that the foregoing is a complete statement of any ankruptcy proceeding. | agreement or arrangement for | payment to me for re | epresentation of the debtor(s) in |
| Dated | : November 15, 2010 | /s/ Joseph Corne | II | |
| | | Joseph Cornell 2 Wayne Young La 3561 N. College A Fayetteville, AR 7 479-571-8696 Fa | w Firm, PA Avenue 2703 x: 479-571-8984 | |
| | | jcornell@wayney | ounglaw.com | |

B 201A (Form 201A) (12/09)

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF ARKANSAS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Form B 201A, Notice to Consumer Debtor(s)

Page 2

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Western District of Arkansas

| In re | Scotty R Smith Shirley J Smith | | Case No. | | |
|-------|-----------------------------------|-----------|----------|--------------|--|
| | | Debtor(s) | Chapter | 13 | |
| | CEDATELCATION | | D DEDEOI | D (G) | |

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

| Scotty R Smith Shirley J Smith | X /s/ Scotty R Smith | November 15, 2010 |
|-----------------------------------|---------------------------------------|-------------------|
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| Case No. (if known) | ${ m X}^{\prime}$ /s/ Shirley J Smith | November 15, 2010 |
| | Signature of Joint Debtor (if | any) Date |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Western District of Arkansas

| Scotty R Smith In re Shirley J Smith | | Case No. | |
|--|---|---------------------|---------------------|
| | Debtor(s) | Chapter | 13 |
| VER | IFICATION OF CREDITOR | R MATRIX | |
| he above-named Debtors hereby verify t | that the attached list of creditors is true and | correct to the best | of their knowledge. |
| Date: November 15, 2010 | /s/ Scotty R Smith | | |
| | Scotty R Smith | | |
| | Signature of Debtor | | |
| Date: November 15, 2010 | /s/ Shirley J Smith | | |
| | Shirley J Smith | | |

Signature of Debtor

American Education Services Attn: Loan Origination 1200 N. 7th Street Harrisburg, PA 17102-1444

AmeriCredit Financial Services Attn: Bankruptcy Department PO Box 183583 Arlington, TX 76096

Amex C/O Beckett & Lee PO Box 3001 Malvern, PA 19355

AT&T Mobility
Attn: Bankruptcy Department
PO Box 769
Arlington, TX 76004

Atlantic Credit & Finance, Inc PO Box 13386 Roanoke, VA 24033

BAC Home Loans Servicing, LP 7105 Corporate Drive Plano, TX 75024

Bank of America Attn: Bankruptcy Department NC4-105-02-77 PO Box 26012 Greensboro, NC 27410

Burton E. Stacy Jr. Attorney at Law 216 N. Main Street #4 Bentonville, AR 72712

Capital One Bank (USA), N.A. Attn: Debt Management PO Box 5155 Norcross, GA 30091 CBE Group 131 Tower Park Drive Suite 100 Waterloo, IA 50701

Chase Auto Finanace 900 Stewart Ave. Garden City, NY 11530

Chase Bank USA, N.A.
Attn: Bankruptcy Department 270 Park Avenue
Floor Twelve
New York, NY 10017-2014

CitiBank South Dakota, N.A. Attn: Centralized Bankruptcy PO Box 20363 Kansas City, MO 64195

Discover Bank DFS Services LLC P O Box 3025 New Albany, OH 43054

Discover Financial Services Attn: Bankruptcy Department PO Box 3025 New Albany, OH 43054

Dish Network 5701 South Santa Fe Drive□□ Littleton, CO 80120

Freddie Jones PO Box 285 Arkoma, OK 74901

GE Money Bank / JCPenny Attn: Bankruptcy Department PO Box 103106 Roswell, GA 30076 GE Money Bank / Sam's Club Attn: Bankruptcy Department PO Box 103104 Roswell, GA 30076

HSBC / Polrs 90 Christiana Road New Castle, DE 19720

HSBC / Suzuki PO Box 5253 Carol Stream, IL 60197

HSBC Bank (USA), N.A. Attn: Bankruptcy Department PO Box 5253 Carol Stream, IL 60197

Midland Credit Management, Inc PO Box 939019 San Diego, CA 92123-9019

Paragon Way Inc 2101 W Ben White Blvd Austin, TX 78704

Sears / CBSD Attn: Centralized Bankruptcy PO Box 20363 Kansas City, MO 64195-0363

Security Bankcard Center, Inc. Attn: Operations Department PO Box 22116 Tulsa, OK 74121-2116

Southern & Allen Attorneys at Law PO Box 17248 Little Rock, AR 72222

Tracy Jones General Delivery Springdale, AR 72762

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B22C (Official Form 22C) (Chapter 13) (04/10)

| _ | Scotty R Smith | According to the calculations required by this statement: |
|----------|-----------------|---|
| In re | Shirley J Smith | ■The applicable commitment period is 3 years. |
| <i>a</i> | Debtor(s) | ☐The applicable commitment period is 5 years. |
| Case N | umber: | □Disposable income is determined under § 1325(b)(3). |
| | (If known) | ■Disposable income is not determined under § 1325(b)(3). |
| | | (Check the boxes as directed in Lines 17 and 23 of this statement.) |

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| | Part I. REPORT OF INCOME | | | |
|---|---|-------|--------------------|--------------------|
| | Marital/filing status. Check the box that applies and complete the balance of this part of this state | men | t as directed. | |
| 1 | a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. | ••> | | |
| | b. Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") All figures must reflect average monthly income received from all sources, derived during the six | 1e'') | Column A | Column B |
| | calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line. | | Debtor's Income | Spouse's Income |
| 2 | Gross wages, salary, tips, bonuses, overtime, commissions. | \$ | 0.00 | \$ 0.00 |
| 3 | Income from the operation of a business, profession, or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 3. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part IV. | | | |
| | Debtor Spouse | | | |
| | a. Gross receipts \$ 0.00 \$ 0.00 b. Ordinary and necessary business expenses \$ 0.00 \$ 0.00 | | | |
| | c. Business income Subtract Line b from Line a | \$ | 0.00 | \$ 0.00 |
| 4 | Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part IV. Debtor Spouse a. Gross receipts \$ 0.00 \$ 0.00 | | | |
| | b. Ordinary and necessary operating expenses \$ 0.00 \$ 0.00 | | | |
| | c. Rent and other real property income Subtract Line b from Line a | \$ | 0.00 | \$ 0.00 |
| 5 | Interest, dividends, and royalties. | \$ | 0.00 | \$ 0.00 |
| 6 | Pension and retirement income. | \$ | 861.00 | \$ 0.00 |
| 7 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. | \$ | 0.00 | \$ 0.00 |
| 8 | Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to | | | |
| | be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 1,070.00 | \$ | 0.00 | \$ 0.00 |

| 9 | Income from all other sources. Specify source and a on a separate page. Total and enter on Line 9. Do no maintenance payments paid by your spouse, but in separate maintenance. Do not include any benefits payments received as a victim of a war crime, crime a international or domestic terrorism. | t include alimony clude all other pa received under the | or separate yments of alimony or Social Security Act or | | | | |
|----|--|--|--|---|-------|-----------|--|
| | a. \$ | Debtor | Spouse \$ | | | | |
| | b. \$ | | \$ | \$ 0.0 | 00 \$ | 0.00 | |
| 10 | Subtotal. Add Lines 2 thru 9 in Column A, and, if Co in Column B. Enter the total(s). | olumn B is comple | ted, add Lines 2 through 9 | \$ 861.0 | \$ | 0.00 | |
| 11 | Total. If Column B has been completed, add Line 10, the total. If Column B has not been completed, enter | | | \$ | | 861.00 | |
| | Part II. CALCULATION (| OF § 1325(b)(4 |) COMMITMENT 1 | PERIOD | | | |
| 12 | Enter the amount from Line 11 | | | | \$ | 861.00 | |
| 13 | Marital Adjustment. If you are married, but are not a calculation of the commitment period under § 1325(b enter on Line 13 the amount of the income listed in Lithe household expenses of you or your dependents an income (such as payment of the spouse's tax liability debtor's dependents) and the amount of income devoto on a separate page. If the conditions for entering this a. b. c. Total and enter on Line 13 |)(4) does not require 10, Column B d specify, in the lifter the spouse's suped to each purpose | re inclusion of the income that was NOT paid on a re nes below, the basis for ex- port of persons other than . If necessary, list addition | of your spouse, gular basis for cluding this the debtor or the | \$ | 0.00 | |
| 14 | Subtract Line 13 from Line 12 and enter the result. | | | | | 861.00 | |
| 15 | Annualized current monthly income for § 1325(b)(enter the result. | 4). Multiply the a | mount from Line 14 by the | number 12 and | \$ | 10,332.00 | |
| 16 | Applicable median family income. Enter the median information is available by family size at <a applicabl<="" href="www.usdoj.gov/www.usdoj.go</td><td>gov/ust/ or from th</td><td></td><td></td><td>\$</td><td>43,370.00</td></tr><tr><td>17</td><td>Application of § 1325(b)(4). Check the applicable but the amount on Line 15 is less than the amount of top of page 1 of this statement and continue with the top of the this statement and continue with the top of the top of the top of the this statement and continue with the top of the top of the top of the top of th</td><td>n Line 16. Check this statement. nt on Line 16. Ch</td><td>the box for " td="" the=""><td>•</td><td>riod is 3</td><td>years" at the</td> | • | riod is 3 | years" at the | | | |
| | Part III. APPLICATION OF § 1325 | 5(b)(3) FOR DET | ERMINING DISPOSAB | LE INCOME | ı | | |
| 18 | Enter the amount from Line 11. | | | | \$ | 861.00 | |
| 19 | Marital Adjustment. If you are married, but are not fany income listed in Line 10, Column B that was NO debtor or the debtor's dependents. Specify in the lines payment of the spouse's tax liability or the spouse's su dependents) and the amount of income devoted to eac separate page. If the conditions for entering this adjustable. | T paid on a regular below the basis for apport of persons on the purpose. If necessity | basis for the household expression excluding the Column B ther than the debtor or the ssary, list additional adjust | spenses of the income(such as debtor's | | | |
| | Total and enter on Line 19. | | \$ | 0.00 | | | |
| 20 | Current monthly income for § 1325(b)(3). Subtract | Line 19 from Line | 18 and enter the result. | | \$ | 861.00 | |
| 21 | Annualized current monthly income for § 1325(b)(a enter the result. | 3). Multiply the an | nount from Line 20 by the | number 12 and | \$ | 10,332.00 | |

| 22 | Applic | Applicable median family income. Enter the amount from Line 16. | | | | | | \$ | 43,370.00 |
|-----|--|---|--------------------------|---------|----------|--|--|-----------|-----------|
| | Applic | ration of § 1325(b)(3). Che | ck the applicable box an | ıd pro | ceed as | directed. | | | |
| 23 | | amount on Line 21 is mor 25(b)(3)" at the top of page | | | | | | ned under | r § |
| | | amount on Line 21 is not 25(b)(3)" at the top of page | | | | | | | |
| | | Part IV. CA | ALCULATION C |)F D | EDU | CTIONS FRO | OM INCOME | | |
| | | Subpart A: Do | eductions under Star | ıdarc | ls of th | e Internal Reve | nue Service (IRS) | | |
| 24A | National Standards: food, apparel and services, housekeeping supplies, personal care, and miscellaneous. Enter in Line 24A the "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | | Expenses for the | \$ | |
| 24B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. | | | | | onal Standards for able at er of members of your your household who are e number stated in Line 65, and enter the result in and older, and enter the | | | |
| | House | ehold members under 65 y | ears of age | Hous | sehold 1 | old members 65 years of age or older | | | |
| | a1. | Allowance per member | | a2. | Allowa | ance per member | | | |
| | b1. | Number of members | | b2. | Numbe | er of members | | | |
| | c1. | Subtotal | | c2. | Subtot | al | | \$ | |
| 25A | Utilitie | Standards: housing and uses Standards; non-mortgage ble at www.usdoj.gov/ust/ o | expenses for the applica | able co | ounty a | nd household size. | | \$ | |
| 25B | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter | | | | | | ze (this information is b the total of the Average | \$ | |
| 26 | c. Net mortgage/rental expense Subtract Line b from Line a. Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below: | | | | | lousing and Utilities | \$ | | |
| 27A | Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | \$ | | | |

| 27B | \$ | | | | | |
|-----|--|---|----|--|--|--|
| 28 | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. Do not enter an amount less than zero. | | | | | |
| | a. IRS Transportation Standards, Ownership Costs \$ Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 \$ | | | | | |
| | c. Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a. | \$ | | | |
| 29 | Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Monthly Payments for any debts secured by Vehicle 2, as stated in Lithe result in Line 29. Do not enter an amount less than zero. | e IRS Local Standards: Transportation court); enter in Line b the total of the Average ne 47; subtract Line b from Line a and enter | | | | |
| | a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle | \$ | | | | |
| | b. 2, as stated in Line 47 | \$ | | | | |
| | c. Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a. | \$ | | | |
| 30 | Other Necessary Expenses: taxes. Enter the total average monthly e state, and local taxes, other than real estate and sales taxes, such as in security taxes, and Medicare taxes. Do not include real estate or sale | come taxes, self employment taxes, social | \$ | | | |
| 31 | Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. | | | | | |
| 32 | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. | | | | | |
| 33 | al monthly amount that you are required to spousal or child support payments. Do not | \$ | | | | |
| 34 | other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. | | | | | |
| 35 | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. | | | | | |
| 36 | s | | | | | |
| 37 | \$ | | | | | |
| 38 | Total Expenses Allowed under IRS Standards. Enter the total of L | ines 24 through 37. | \$ | | | |
| | Subpart B: Additional Living | Expense Deductions | | | | |
| | Note: Do not include any expenses that | · - | | | | |
| | 1000. Do not metade any expenses that you have listed in Lines 27-31 | | | | | |

| _ | |
|----|--|
| Э. | |
| | |

| | | avings Account Expenses. List the monthly expenses in only necessary for yourself, your spouse, or your | | | | | |
|----|---|--|---|----|--|--|--|
| 39 | a. | Health Insurance | \$ | | | | |
| | b. | Disability Insurance | \$ | | | | |
| | c. | Health Savings Account | \$ | | | | |
| | Total a | nd enter on Line 39 | | \$ | | | |
| | If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$ | | | | | | |
| 40 | expens ill, or d | Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34. | | | | | |
| 41 | Protect actually applicate | \$ | | | | | |
| 42 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. | | | | | | |
| 43 | Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards. | | | | | | |
| 44 | Additional expensions Standar or from reason | \$ | | | | | |
| 45 | Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income. | | | | | | |
| 46 | Total A | Additional Expense Deductions under § 707(b). | Enter the total of Lines 39 through 45. | \$ | | | |

| | S | subpart C: Deductions for Del | bt Payment | | | | |
|----|--|--|----------------------|---------------------------|----|--|--|
| 47 | Future payments on secured claims. own, list the name of creditor, identify check whether the payment includes ta scheduled as contractually due to each case, divided by 60. If necessary, list a Payments on Line 47. | Payment, and tal of all amounts the bankruptcy | | | | | |
| | Name of Creditor F | Does payment include taxes or insurance | | | | | |
| | a. | | \$ Total: Add Lines | ☐ ges ☐ no | \$ | | |
| 48 | Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in | | | | | | |
| | a. | | \$ | Total: Add Lines | \$ | | |
| 49 | Payments on prepetition priority cla priority tax, child support and alimony not include current obligations, such Chapter 13 administrative expenses. resulting administrative expense. | r claims, for which you were liable at to as those set out in Line 33. | he time of your bank | kruptcy filing. Do | \$ | | |
| 50 | issued by the Executive Office information is available at www. the bankruptcy court.) | napter 13 plan payment. strict as determined under schedules e for United States Trustees. (This vw.usdoj.gov/ust/ or from the clerk of ve expense of Chapter 13 case | x Total: Multiply Li | nes a and b | \$ | | |
| 51 | Total Deductions for Debt Payment. | Enter the total of Lines 47 through 50 |). | | \$ | | |
| | S | ubpart D: Total Deductions fi | rom Income | | • | | |
| 52 | Total of all deductions from income. | Enter the total of Lines 38, 46, and 5 | 1. | | \$ | | |
| | Part V. DETERMIN | NATION OF DISPOSABLE I | NCOME UNDI | ER § 1325(b)(2) | | | |
| 53 | Total current monthly income. Enter the amount from Line 20. | | | | | | |
| 54 | Support income. Enter the monthly a payments for a dependent child, report law, to the extent reasonably necessary | ts, or disability ble nonbankruptcy | \$ | | | | |
| 55 | Qualified retirement deductions. En wages as contributions for qualified re loans from retirement plans, as specific | tirement plans, as specified in § 541(b | | | \$ | | |
| 56 | Total of all deductions allowed unde | r § 707(b)(2). Enter the amount from | Line 52. | | \$ | | |

| 57 | Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines a-c below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable. | | t | |
|------------------------------------|---|-------------------|----------|--|
| | Nature of special circumstances | Amount of Expense | | |
| | a. | \$ | | |
| | b. | \$ | | |
| | c. | \$ | | |
| | | Total: Add Lines | \$ | |
| 58 | Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56, and 57 and enter the result. | | \$ | |
| 59 | Monthly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and enter the result. | | \$ | |
| Part VI. ADDITIONAL EXPENSE CLAIMS | | | | |
| | Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare f you and your family and that you contend should be an additional deduction from your current monthly income under § 07(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for ach item. Total the expenses. | | | |
| 60 | Expense Description | Monthly Amoun | t | |
| | a. | \$ | | |
| | b. | \$ | | |
| | c. | \$ | | |
| | d. | \$ | | |
| | Total: Add Lines a, | b, c and d \$ | | |
| Part VII. VERIFICATION | | | | |
| | I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.) Date: November 15, 2010 Signature: //s/ Scotty R Smith | | | |
| 61 | Scotty R Smith (Debtor) | | | |

Signature /s/ Shirley J Smith

Shirley J Smith

(Joint Debtor, if any)

Date: **November 15, 2010**

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 05/01/2010 to 10/31/2010.

Line 6 - Pension and retirement income

Source of Income: **Pension**

Constant income of \$861.00 per month.

Non-CMI - Social Security Act Income

Source of Income: **Social Security** Constant income of **\$1,287.00** per month.

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period **05/01/2010** to **10/31/2010**.

Line 8 ssa - Unemployment compensation (Non-CMI)

Source of Income: **Unemployment**Constant income of \$1,070.00 per month.